

PRE-DISPOSITION HOME DETENTION APPLICATION

APPLICATION MUST BE COMPLETED & SUBMITTED BY DEFENDANT'S ATTORNEY

DATE _____ CASE # _____ CHARGES _____

NAME _____ Alias _____
Print

DATE OF BIRTH _____ SOCIAL SECURITY # _____ AGE ____ RACE ____ SEX ____

ADDRESS _____ APT # _____ CITY/STATE _____ ZIP _____
RESIDENCE CANNOT BE SECTION 8 HOUSING OR PUBLIC HOUSING FOR SOME OFFENSES. HOUSING AUTHORITY APPROVAL REQUIRED

* Whose name is the home phone listed under? _____

* Whose name is the residence listed under? _____

(THIS PERSON **MUST** GIVE VERBAL PERMISSION TO USE THEIR PHONE FOR HOME DETENTION TO ADULT COURT SERVICES **BEFORE** THE REPORT GOES TO THE JUDGE, AND MUST COME TO ACS AND SIGN A CONSENT FORM **BEFORE** STARTING HOME DETENTION.)

HOME PHONE _____ WORK PHONE _____ CELL _____

* Name of home phone service provider: _____ (CenturyLink works best / NO Mediacom)

* **NO SPECIAL FEATURES ALLOWED ON PHONE.** Do you have special features on telephone service? _____
(SPECIAL FEATURES EXAMPLE: CALLER ID, CALL WAITING, CALL FORWARDING, IN ADDITION NO ANSWERING MACHINE, NO VOICE MAIL, NO MODEM ETC.)
YOU NEED A REGULAR PUSH BUTTON TELEPHONE NOT A CORDLESS. YOUR PHONE MUST BE IN WORKING ORDER BEFORE YOU START HOME DETENTION

PLACE OF EMPLOYMENT _____ Work # _____

Address _____ CITY / STATE _____

Supervisor _____ **** ATTACH CURRENT PAY STUB TO THIS APPLICATION ****

*If self-employed you must provide a copy of your business license with copy of taxes from the prior year *

FEES ASSESSED FOR HOME DETENTION ARE BASED ON VERIFIED HOURLY PAY // First 2-Weeks Fees are due when HD is started

Hours of employment: Monday _____ Tuesday _____ Wednesday _____ Thursday _____

Friday _____ Saturday _____ Sunday _____ Hourly Rate/ Salary: \$ _____

* ARE YOU CURRENTLY ATTENDING SCHOOL? _____
NAME OF SCHOOL -- ATTACH CURRENT CLASS SCHEDULE

ATTORNEY _____ PROBATION/PAROLE OFFICER _____
Name and phone Name and phone

PROSECUTOR _____ Opposed / Not Opposed

* NEXT COURT DATE: _____ # DAYS TO SERVE _____ BEGINNING _____

Have you ever been on the Home Detention program before under Court Services? Y / N WHAT YEAR? _____

Successful / Revoked / Absconded _____

Were fees paid in full: Y / N

Court Services use only: